

## NOTES

**ADD:** 2  
**COUNTY:** HOPKINS  
WILLOW BROOK PCH

October 1998 added 2 Personal Care beds for a total of 58 Personal Care beds.

**COUNTY:** LIVINGSTON  
LIVINGSTON CONVALESCENT CENTER

CON for 4 additional beds approved 7-22-99 and issued 8-23-99. Rooms available for occupancy 2-1-00.

**ADD:** 3  
**COUNTY:** DAVIESS  
WELLINGTON PARC OF OWENSBORO

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

**COUNTY:** MCLEAN  
MCLEAN COUNTY GENERAL HOSPITAL INC

Facility closed. 1999 data not available.

SUNNY ACRES

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

**ADD:** 4  
**COUNTY:** ALLEN  
HILLCREST NURSING HOME

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

SCOTTSVILLE MANOR

Data reported is from November and December 1999 only. Facility changed ownership and name at that time. New name is Scottsville Manor, Inc. 1999 data prior to November is not available.

**COUNTY:** HART  
MEADOWBROOK TERRACE OF HART COUNTY

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

**COUNTY:** LOGAN  
LOGAN MEMORIAL HOSPITAL/TCU

Nursing Facility beds closed 12/20/99.

**COUNTY:** SIMPSON  
FRANKLIN PERSONAL CARE

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

## NOTES

<b>ADD:</b> 5 <b>COUNTY:</b> MARION ST FRANCIS NURSING HOME CENTER	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
<b>COUNTY:</b> WASHINGTON SANSBURY CARE CENTER	Formerly known as Sansbury Memorial Infirmary.
<b>ADD:</b> 6 <b>COUNTY:</b> JEFFERSON FRAZIER REHAB CENTER	On 2/1/99 19 beds temporarily delicensed and granted temporary use for comprehensive rehab beds. 5/19/99 19 beds were delicensed as skilled nursing beds and relicensed as comprehensive rehab beds.
JAMES S TAYLOR MEMORIAL HOME	Facility temporarily closed due to unforeseen roof problems. 1999 data is not available.
LYNDON LANE NURSING CTR	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
PAVILION HEALTH CARE CENTER	Facility license involuntarily terminated 6-19-98.
ST MATTHEWS MANOR	Converted 4 Nursing Home beds to Nursing Facility beds 1/1/99.
SUBURBAN HOSPITAL	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
W W SPRADLING REST HOME	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
<b>COUNTY:</b> SHELBY CRESTVIEW HEALTH CARE CENTER	Census data may be in error. Corrections were requested from the facility but not received by this office.
<b>COUNTY:</b> TRIMBLE BEDFORD HEALTH CARE CENTER	Formerly Extendacare - Bedford
<b>ADD:</b> 7 <b>COUNTY:</b> CAMPBELL HIGHLANDS OF FT THOMAS HLTHCARE CTR & REHAB	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

## NOTES

LAKESIDE HEALTH CARE CENTER	Formerly Lakeside Place
<b>COUNTY:</b> KENTON ST CHARLES CARE CTR	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
ST ELIZABETH MEDICAL CENTER SOUTH	St. Elizabeth Medical Ctr. South no longer has Long-Term Care. All long-term care patients reside at
<b>COUNTY:</b> OWEN OWEN COUNTY MEMORIAL HOSPITAL	Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.
<b>ADD:</b> 8 <b>COUNTY:</b> BRACKEN EXTENDACARE AUGUSTA	Name changed from Extendacare Augusta to Augusta Health Care 11-1-99.
<b>ADD:</b> 9 <b>COUNTY:</b> MONTGOMERY WINDSOR CARE CTR	Added 20 additional Personal Care Beds on 12/3/99.
<b>ADD:</b> 1 <b>COUNTY:</b> BOYD SUNRISE NURSING AND REHABILITATION CTR INC	Voluntarily closed for renovation as of April 23, 1997.
<b>COUNTY:</b> GREENUP FRASURE'S RIVERVIEW PERSONAL CARE HOME	Name changed from River Home Inc to Frasure's Riverveiw Personal Care on 5-1-99.
<b>ADD:</b> 1 <b>COUNTY:</b> FLOYD MOUNTAIN MANOR OF PRESTONSBURG	Formerly Mountain Manor of Prestonsburg.
<b>COUNTY:</b> PIKE GOOD SHEPHARD COMMUNITY NURSING CENTER	Formerly Presbyterian Health Center at Phelps.

## NOTES

**ADD:** 1  
**COUNTY:** PULASKI  
SOMERVIEW PERSONAL CARE

Formerly known as Colonial Care Home. Facility closed by the State in August 1999. Facility changed ownership and reopened 2-1-00. Data for 1999 not available.

**ADD:** 1  
**COUNTY:** FAYETTE  
CENTRAL BAPTIST HOSPITAL

Nursing Facility beds closed 8/31/00.

EXCEPTICON LEXINGTON CAMPUS

Facility voluntarily closed 12-31-99.

GLEN ARVIN PCH

Facility did not submit survey in time to be included in 1999 report. Data submitted was in error so no data appears for the payor source in section II.

JEWISH HOSPITAL LEXINGTON

Beds closed mid 1999 after change of ownership to St. Joseph East. Data for 1999 not available.

SAMARITAN HOSPITAL

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

SUNBRIDGE CARE & REHABILITATION - CAMBRIDGE

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

SUNBRIDGE CARE & REHABILITATION - PIMLICO

Facility did not submit survey. A certified letter was mailed 5-26-00 notifying the facility that submission of this survey was required by 902 KAR 20:008.

**COUNTY:** WOODFORD  
WOODFORD MEMORIAL HOSPITAL

Facility closed. 1999 data not available.